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7590 11/03/2005

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01/25/2006 TBESHAWZ 00000027 011125 10748093

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/748,093	12/30/2003	Thomas A. Wagner	H0006676	6943

TITLE OF INVENTION: HUMAN ACTIVITY COORDINATION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	02/03/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRIEU, VAN THANH	2636	340-539170

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 Kris T. Fredrick
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Honeywell International Inc.

Morristown, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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4b. Payment of Fee(s):

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-1125 (enclose an extra copy of this form).

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Authorized Signature Kris T. Fredrick

Date 11/18/06

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